

Real Estate License Transfer, Name Change or Reactivation Application

You can use this form to change your name, transfer or reactivate your license. If you are applying for your first broker or managing broker license or reinstating your license, use form [RE-620-004](#), Real Estate License Application. Send this completed form and any required documents to:

**Real Estate Licensing
Department of Licensing**

PO Box 9021

Olympia, WA 98507

(360) 664-6500 or (360) 664-6488

To transfer your license:

Complete this form and return your current license showing the office you are leaving.

To change your name:

Complete with this form and enclose a brief letter stating what your name is being changed to and from.

Check all that apply:

☐ Transfer

☐ Name change

☐ Reactivation

Applicant information – Incomplete applications will not be processed.

TYPE or PRINT Name (as it appears on your license, if applicable)			Date of birth	
Home address			(Area code) Telephone number	
City	State	ZIP code	Email	
<p>Answer the following</p> <p>If you answer "Yes" to questions 1-5, attach a letter of explanation. Include the charge, date of conviction, civil judgment or order, county jurisdiction, state, and disposition of charges.</p> <p>1. With the exception of motor vehicle violations, have you been convicted of a gross misdemeanor or felony, in this or any other state, by the federal government or by any other jurisdiction within the past ten years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. Is there a criminal complaint, accusation, or information presently pending against you or are you currently under indictment, in this or any other state, by the federal government or by any other jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Has any professional or occupational license, certification, or permit held by you been fined, suspended, revoked, refused, or denied, in this or any other state, by the federal government or by any other jurisdiction in the past ten years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. Have you ever had a civil court order, verdict, or judgment entered against you in any court of competent jurisdiction, in this or any other state, by the federal government or by any other jurisdiction in the past ten years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>5. Are you currently required to register as a sex offender in this state or any other state? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, in which state _____ and county _____</p>				

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date and place signed

X

Applicant signature

NOTICE: The Department of Licensing may enter your real estate firm's licensed office location at reasonable times to inspect the records that you are required to keep by the statutes and rules that govern the license for which you are applying. It is your responsibility as a licensee to cooperate with an audit or an investigation by providing DOL with the requested documents and a written explanation of the matter contained in a complaint upon the Department's request.

Employing firm information

TYPE or PRINT Firm name (where applicant will be licensed)		Firm license number	
Mailing address		(Area code) Telephone number	
City		State	ZIP code
Physical address (if different)			
City		State	ZIP code
TYPE or PRINT Designated broker name as it appears on your license		License number	
TYPE or PRINT Branch manager name as it appears on your license		License number	

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

_____	X
Date and place signed	Designated broker/ Branch manager signature*

***Submit a copy of the delegation authority if not signed by the designated broker or branch manager.**

Once filed, this application is a public record and is subject to public disclosure.

For office use only				
Prof	License number	Effective date	Expiration date	Firm number

RCW 18.85.191; 18.85.361(6); 26.23.150; 42.56.